Utah Department of Environmental Quality Division of Drinking Water

Public Water System Inventory Report

Run Date: 08/04/2011 12:10 pm

PWS ID: UTAH14012 Name: LEAMINGTON TOWN WATER SYSTEM

Legal Contact LEAMINGTON Rating: Approved

MICHAEL A FERRELL Rating Date: 09/23/1991

Address: BOX 38072 Activity Status: Active

LEAMINGTON, UT 84638

Phone Number: 435-864-6487

City Served (Area):

County: MILLARD COUNTY

Gal/Day Gal/Min

System Type: Community

Last Inv Update: 06/15/2010

Activity Status Cd: Active

Population: 250

Last Inv Update: 06/15/2010

Last Snty Srv Dt: 12/31/2010

Total Dsgn Cap:

Surveyor: KATE JOHNSON

Total Emerg Cap:

Oper Period: 1/1 to 12/31

Contacts

Contact			Phone Numbers							
Type	Name	Title	Office	Emergency	Email Address					
AC	FERRELL, MICHAEL A	MANAGER	435-864-4414	435-857-2590	mike-f@ipsc.com					

Service Connections

Connection			Number	
Type	Meter Type Code	Meter Size	Connections	
Residential	Metered	0	69	
Commercial	Unknown	0	15	
Combined	Unknown	0	10	
			94 T o	• otal Svc Connections

Storage

Total Storage: 390,000 GAL Number of Units: 3 Adequate Capacity: NO

No.	Name	Туре	Effective Volume	Constr Matrl	Overflow Elev	Activity Status	Press'd
ST003	200K CONCRETE TANK	Ground	200,000 GAL	Concrete		Α	NO
ST001	OLDER CONCRETE TANK	Ground	150,000 GAL	Concrete		Α	NO
ST002	NEWER STEEL TANK	Ground	40,000 GAL	Steel		Α	NO

Treatment Plants

No.	Plant Name	Approved Design Capacity (gal/day)	Activity Status	Treatment Process
TP002	UP AND LOW NARROWS CHLORINATOR		Α	

Distribution System

Pump Type	Total Dy	n Head	Pressure	Cross	Auhority
	ft H2O	P.S.I.	Adequate	Connection	Statement
			No		

Sources

No.	Source Name	Activity Status	Source Type	Well Dia.	Safe Yield *	Pump Capacity	Location Data On File	Water Type	Availability	Period of Operation	Grnd Wtr Indicator
WS001	TOWN WELL	Active	WL	8	200 GPM	448 GPM	Yes	GW	Seasonal	4/1 to 9/30	
WS002	UP AND LOW NARROWS SF	Active	SP				Yes	GW	Permanent	1/1 to 12/31	

^{*}Reports measured flow for wells, approved design capacity for all other sources.

Sources

No.	Source Name	Activity Status	Source Type	Well Dia.	Safe Yield *	Pump Capacity	Location Data On File	Water Type	Availability	Period of Operation	Grnd Wtr Indicator
WS003	UP AND LOW NETTIES SPR	Active	SP				Yes	GW	Permanent	1/1 to 12/31	
WS004	BLACK WILLOW SPRING	Active	SP				Yes	GW	Seasonal	1/1 to 12/31	

 $^{^*}$ Reports measured flow for wells, approved design capacity for all other sources.